## BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									Application or Docket Number 2983/369 43 - 09   8   4   0   14					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTIT						
TOTAL CLAIMS			68				Г	RATE	: T	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE		355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			68 minus 20=		. 48			X\$ 9=		432	OR	X\$18=		
INDEPENDENT CLAIMS			6 minus 3 =		3			X40=		120	OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		,,,,,	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL 907		OR	TOTAL			
CLAIMS AS AMENDED - PART II								IOIA	ַ נ	907	On	OTHER	THAN	
سختم		(Column 1)	(Colun		mn 2)	(Column 3) Si		SMAL	LE	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	·	=		X\$ 9=	.		OR	X\$18=		
	Independent + Minus		***		=		X40=			OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDE				CLAIM			+135=			OR	+270=		
							. <b>L</b>	TOTA			OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu		(Column 3)		טטוו. דינ				ADDI1.1 LL	· · · · · · · · · · · · · · · · · · ·	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	] [	X\$ 9=			OR	X\$18=		
	Independent	*	Minus			=	┧┟	X40=			OR	X80=		
Ľ	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		┛┢	+135=			OR	+270=		
								TOTA			OR	TOTAL		
	(Column 1) (Column 2) (Column 3)											ADDIT. FEE		
	(Column 1) CLAIMS		HIGH		EST		1 _		Т	ADDI-	ı		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	-	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	]	X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=	┨┞	X40=	1		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						┙┞	+135=	$\dagger$	-	OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE												TOTAL		
***	If the "Highest Nu	mber Previously Pa mber Previously Pa hber Previously Pai	aid For" IN THI	S SPACE	is less tha	an 3, enter "3."	Λ.	DDIT. FE		opriate box	•	ADDIT. FEE umn 1.		